•	'Declara	ition For U	J.S. Patent	<b>Application</b>	1
As a below named in	nventor, I hereby dec	lare that:			
My residence, post o	office address and cit	izenship are as st	ated below next to	my name.	
I believe I am the ori plural names are liste (INSERT TITLE)	iginal, first and sole ied below) of the subje	inventor (if only dect matter which i	one name is listed to s claimed and for v Position	below) or an origi which a patent is so for intra	nal, first and joint inventor (iought on the invention entitle
fication i	with cis-u	rocanic c	icid	J	
the specification of v					
(Check one of 1, 2, or 3.)	<ol> <li>is attached</li> </ol>	hereto.	/ 0		
	2. ★ was filed o	on / Marc	n 2009	as as	1
	<ol> <li>is attached</li> <li>was filed of Internations and was am</li> <li>was filed of U.S. Applie</li> </ol>	al PC1 Application	on Serial No	C1/F12C04/	1000109
	2 was filed a		(if applic	cable)	
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	and was am	ended on		•	
I hanaha atata that I l			(if applic	cable)	
as amended by any a	nave reviewed and un mendment referred to	iderstand the confo	tents of the above-	identified specific	cation, including the claim(s)
I acknowledge the di Regulations, §1.56.	uty to disclose infor	mation which is	material to patenta	ability as defined	in Title 37, Code of Federa
I hereby claim foreig	n priority benefits u	ınder Title 35 H	nited States Code	\$110 of any form	ion annliantian for any
inventor's certificate	listed below and hav	e also identified	below any foreign	application for p	eign application for patent of atent or inventor's certificate
	erore that of the appl	ication for which	priority is claimed	d: /	Priority Claimed
(List prior foreign	20030379 (Number)	Country	19/03/	12005	Yes No
applications.)				ear Filed)	Priority Claimed  Yes No  Yes No
	(Number) See atta	(Country) sched list for addi	(Day/Month/Ye tional prior foreign	ear Filed)	<del></del>
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I hereby claim the ber as the subject matter o provided by the first p as defined in Title 37, the national or PCT in	nefit under Title 35, U feach of the claims o paragraph of Title 35, Code of Federal Reg nternational filing da	United States Cod f this application United States Co gulations, §1.56, v te of this applicat	e, §120, of any Uni is not disclosed in t de, §112, I acknow vhich occurred betv ion:	ited States applica he prior United Sta rledge the duty to d ween the filing dat	tion listed below and, insofar ates application in the manner disclose material information the of the prior application and
	(Application Se	erial No.)	(Filing Date)	(Status)	
	(Application Se	erial No.)	(Filing Date)	(Status)	
I hereby appoint as pr	incipal attorney Jame	es C. Lydon, Reg	g. No. <u>30,082.</u>		
Please direct all comn	nunications to the fol	llowing address:	James C. Lydon 100 Daingerfield Suite 100 Alexandria, VA Telephone: (703 Facsimile: (703	1.Road 22314 3) 838-0445	
and believed	e nunishable by fine	er inat these stater	nents were made w	vith the knowledge	ements made on information that willful false statements 18 of the United States Code trissued thereon.
Full name of first or so	olo iduktioni oli o	isse LEI	NO		
Inventor's Signature:	Mention AND	-J3E 31		D 1 AAE	15-00
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	innish				
Post Office Address:					

Jarmo LAIHIA Full name of second inventor: 1 2005-05-04 Date: Inventor's Signature: FI-21420 Lieto, Finland Residence: Vaalanti Citizenship: Finnish Post Office Address: Full name of third inventor: Inventor's Signature: Date:\_\_\_ Residence: Citizenship: \_\_\_\_ Post Office Address: \_\_ Full name of fourth inventor: Date: Inventor's Signature: Residence: Citizenship: \_ Post Office Address: Full name of fifth inventor: \_\_\_\_\_\_Date:\_\_\_\_\_\_ Inventor's Signature:\_\_\_ Residence: Citizenship: \_ Post Office Address: \_\_ Full name of sixth inventor: \_\_\_\_\_\_Date:\_\_\_\_\_\_ Inventor's Signature:\_\_\_\_ Residence: Citizenship: Post Office Address: Full name of seventh inventor: Inventor's Signature:\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_ Residence: Citizenship: \_ Post Office Address: Full name of eighth inventor: Inventor's Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_ Residence: Citizenship: \_

Post Office Address: